### IOWA BOARD OF EDUCATIONAL EXAMINERS

|                   | )                     |  |
|-------------------|-----------------------|--|
| IN THE MATTER OF: | ) Case No. 15-146     |  |
| Samantha Kohls,   | ) License No. 1007798 |  |
| Respondent.       | ) FINAL ORDER         |  |
|                   | )                     |  |

- 1. The Respondent holds an Initial License (FOLDER # 1007798) with an endorsement to teach 5-12 Spanish. Respondent's license expired on March 31, 2016. Respondent also holds an expired Class B license with a K-12 Athletic Coach endorsement.
- 2. Pursuant to Board rule, a practitioner may voluntarily surrender the practitioner's license if the practitioner waives the right to hearing before the Board and notifies the Board of the intent to accept a permanent revocation of the practitioner's license. Upon receipt of a voluntary surrender, "[t]he Board may issue an order permanently revoking the practitioner license . . .." 282 I.A.C. 11.4(6).
- 3. On May 16, 2016, the Respondent filed a Surrender of Practitioner License and Waiver of Formal Hearing form. The voluntary surrender was presented to and accepted by the Board at a meeting held on June 17, 2016.

#### ORDER

THEREFORE, the Board acknowledges the Respondent's voluntary surrender of her practitioner license and incorporates her action into this Order by attaching a copy of the surrender to this Order. In accordance with this filing, all licenses issued by the Board to the Respondent and her privilege to practice in Iowa are PERMANENTLY REVOKED with no possibility of reinstatement.

Dated this 17th day of June, 2016.

Duane T. Magee, Executive Director

On behalf of the Board

Copies to:

Samantha Kohls (restricted certified mail and first-class mail) RESPONDENT

Nick Sarcone (electronic mail) ATTORNEY FOR RESPONDENT

Julie Bussanmas (electronic mail) Assistant Attorney General ATTORNEY FOR STATE

## EXECUTIVE DIRECTOR BOARD OF EDUCATIONAL EXAMINERS

## STATE of IOWA BOARD OF EDUCATIONAL EXAMINERS Grimes State Office Building Des Moines, Iowa 50319-0147

MAY 1.6 2016

# SURRENDER OF PRACTITIONER LICENSE AND WAIVER OF FORMAL HEARING Before the IOWA BOARD OF EDUCATIONAL EXAMINERS

| 1, Samantha            | Kohls | (BoEE Folder No. 1007798), swear      |
|------------------------|-------|---------------------------------------|
| and affirm under oath: |       | · · · · · · · · · · · · · · · · · · · |

that I currently hold a valid or expired Iowa practitioner's license issued by the Iowa Board of Educational Examiners;

that I have been informed of and understand the nature of proceedings before the Board and have received a copy of the rules governing Board proceedings (282 Iowa Administrative Code chapters 11, and 25);

that I am aware that the Board has legal authority to sanction me as a licensed individual only following a formal allegation of conduct violating Board rules, an investigation into the allegation of misconduct, and a hearing at which I have a right to be heard, present evidence, and to contest all allegations against me;

that I understand that by waiving my right to formal accusation and hearing, I give up my right to challenge the allegations against me, and that as a consequence of surrendering my license my privilege to teach, administer, coach, and/or otherwise practice as a licensee in Iowa will be permanently revoked with no possibility of reinstatement;

that I understand that the if the Board accepts my license surrender an Order permanently revoking my license will be issued and the Board will notify NASDTEC ("The National Association of State Directors of Teacher Education and Certification") National Clearinghouse that my license has been revoked and that other state teacher licensing boards will have access to this information.

HAVING ACKNOWLEDGED MY RIGHTS AS OUTLINED ABOVE, I hereby formally waive my right to a formal accusation and hearing before the Board and request that my license(s) to teach, administer, coach, and/or otherwise practice as a licensee of the Board of Educational Examiners in Iowa be revoked. I affirm that my decision is made voluntarily and knowingly.

Practitioner signature

5-13-16

Voluntary surrender-waiver of hearing form.doc Revised 12.15.15